

## **XVIII. SERVICES FOR THE DEAF AND HARD OF HEARING**

Current Providers: \_\_\_\_\_

Funding Sources: \_\_\_\_\_

Total Funding Last Fiscal Year: \_\_\_\_\_

<b>A. EXISTENCE</b>				
Are these services available to older and disabled adults in your community?				
1. Does your community have at least one provider of each of the following services for the deaf or hard of hearing:				
Regional Resource Centers?	Yes		No	
Interpreters?	Yes		No	
Assistive technology/equipment providers?	Yes		No	
Physicians who specialize in hearing loss?	Yes		No	
Hearing aid distributors?	Yes		No	
Audiologists?	Yes		No	
<b>OVERALL EXISTENCE RATING</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4 5</b>

<b>B. ADEQUACY</b>							
Are these services in sufficient supply for those who need it?							
1. Is there a waiting list for any of the following services:							
Regional Resource Centers?			Yes	No			
Interpreters?			Yes	No			
Assistive technology/equipment providers?			Yes	No			
Physicians who specialize in hearing loss (ear, nose, throat doctors)?			Yes	No			
Audiologists?			Yes	No			
If so, how many people are waiting for each service?							
Why is there a waiting list (ex. lack of funding, no provider)?							
(How many people are on the waiting list for each service? If there is no waiting list, is it because everyone who needs services receives them, providers do not keep waiting lists, etc.? How many currently receive service? What is the ratio of the number waiting/the number of people receiving services? How does this ratio compare to the state ratio and similar counties?)							
2. If there is a waiting list, how acceptable is the average waiting time for obtaining services from:							
Regional Resource Centers?			1	2	3	4	5
Interpreters?			1	2	3	4	5
Assistive technology/equipment providers?			1	2	3	4	5
Physicians who specialize in hearing loss?			1	2	3	4	5
Audiologists?			1	2	3	4	5
(What is the average waiting time for each service? For each, how many people did not need services anymore by the time they reached the top of the waiting list?)							
3. How reasonable is the waiting time necessary to obtain a hearing evaluation or an appointment for a hearing aide in your community?			1	2	3	4	5
(What is the average waiting time to get an appointment with a physician who specializes in hearing loss? What is the average							

waiting time to get an appointment with an audiologist? What is the average waiting time to get an appointment with a hearing aide distributor?)	
<p>4. To what extent do people in your community have choices as to providers of services for adults who are deaf or hard of hearing?</p> <p>(How many providers of each type of service are there in your community? What choices do consumers have in the selection of providers according to program policies? According to funding sources?)</p>	1 2 3 4 5
<p>5. How sufficient is funding to provide service to all older and disabled adults in your community who need it?</p> <p>(What funding sources pay for these services in your community? Are there longer waiting lists for certain services and/or payor sources? What is the per capita expenditure on these services in your community? How does this compare to the state average and similar counties?)</p>	1 2 3 4 5
<b>OVERALL ADEQUACY RATING</b>	<b>1 2 3 4 5</b>

## C. ACCESSIBILITY

How obtainable are these services for those most in need?

1. How adequate are the outreach programs for services for the deaf and hard of hearing?  (What types of public information, outreach, and other informational programs are offered to the general public, caregivers, and others?)	1   2   3   4   5
2. To what degree are public communications and outreach activities consumer-friendly to facilitate accessibility of services to the deaf and hard of hearing?  (What is the average reading level of materials? Are materials available in languages other than English? In large-print? In Braille?)	1   2   3   4   5
3. To what degree does the general public know about services for adults who are deaf or hard of hearing, including, but not limited to, Regional Resource Centers for the Deaf and Hard of Hearing?  (What % of consumers are self-or family-referred? What % of these self-referrals are appropriate for service?)	1   2   3   4   5
4. To what extent do key referral sources, such as physicians, nurses, senior center staff, and other professionals, know about services for adults who are deaf or hard of hearing?  (What % of consumers are referred from key referral sources? What % of their referrals are appropriate?)	1   2   3   4   5
5. To what extent are services for adults who are deaf or hard of hearing affordable to everyone who needs assistance?  (What is the average cost of a professional hearing exam in your community? What is the average cost of each type of supportive services in your community? What funding sources are accepted by providers in your community? What % of people are turned away each year because of an inability to pay? What is the per capita public expenditure (for all older and disabled adults) on services for the deaf and hard of hearing in your community?)	1   2   3   4   5
6. To what extent is funding available to consumers in need of financial assistance for hearing assessments and/or hearing aides and technology?	1   2   3   4   5

<p>(Approximately how many hearing exams and how many hearing aides and/or other technologies can be subsidized in your community each year? Do these subsidies work on a sliding scale, or do they pay a set proportion of the cost? What proportion of the people seeking assistance to pay for hearing exams receive funding? What proportion of the people seeking assistance to pay for hearing aides or technologies receive funding? What is the ratio of publicly-funded hearing exams to total hearing exams for the past year in your community? What is the ratio of publicly-funded hearing aides and/or other technologies to all hearing aides fitted and/or other technologies obtained by consumers in your community during the past year?)</p>	
<p>7. To what degree are the program's physical location and service delivery process accessible to people with disabilities?</p> <p>(Are the physical facilities handicap-accessible? Are providers located on public transportation routes?)</p>	<p>1   2   3   4   5</p>
<p>8. To what extent are the hours of operation convenient for adults needing services as well as their caregivers and/or family?</p> <p>(What are the providers' hours of operation? Can consumers access services at night and/or on weekends? Do special charges apply for night or weekend assistance?)</p>	<p>1   2   3   4   5</p>
<p>9. Does your community have at least one provider of each of the services below who will serve adults who are deaf or hard of hearing in assisted living facilities, adult care homes, and nursing facilities:</p> <p>Interpreters?</p> <p>Audiologists?</p> <p>Assistive technology/equipment providers?</p> <p>Physicians who specialize in hearing loss?</p> <p>Hearing aide distributors?</p>	<p>Yes                      No</p> <p>Yes                      No</p> <p>Yes                      No</p> <p>Yes                      No</p> <p>Yes                      No</p>
<p>10. To what extent do public buildings in your community have the technical availability to assist hearing impaired citizens?</p> <p>(What public places in your community offer assistive technology for the hearing-impaired? What types of technology are available? What places have interpreters available? What places have TDD/TTY available?)</p>	<p>1   2   3   4   5</p>

<b>OVERALL ACCESSIBILITY RATING</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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## D. EFFICIENCY AND DUPLICATION OF SERVICES

How reasonable are the costs of services?

Are options for streamlining services available in the community?

1. If there are multiple service providers for any or all of the services for persons who are deaf or hard of hearing in your community, to what extent are the costs among providers of the same services comparable?  (What are average costs for each type of service by provider? How does this range compare to state averages and to each other?)	1	2	3	4	5
2. If there are multiple providers, to what extent do they work together to serve consumers and accomplish projects?  (What types of meetings occur among providers? Do providers representing all the different types of services meet together, or do they primarily meet only with people in the same profession (i.e. do audiologists meet with supportive services providers, or do the two groups meet separately? Do providers have any cooperative agreements with each other? How often do providers collaborate on projects or cases?)	1	2	3	4	5
3. How adequate are the referral and evaluation processes in-place in your community to ensure that referrals to services for adults who are deaf or hard of hearing are made in a timely manner?  (What are the screening and referral policies, rules and procedures? How long, on average, does it take from initial contact to screening to service provision? To what other types of services do hearing services providers refer their consumers? What % are referred to other agencies/services?)	1	2	3	4	5
4. To what extent do the public and not-for-profit supportive services providers utilize cost-savings practices such as volunteer labor and/or donated spaces?  (What % of providers' revenues comes from these sources?)	1	2	3	4	5
5. To what extent do public and not-for-profit supportive services providers use budget-extending practices, such as fundraisers, foundation grants, memorial gifts, or consumer contributions to serve more consumers?  (What % of providers' revenues comes from these sources?)	1	2	3	4	5

OVERALL EFFICIENCY AND DUPLICATION RATING	1	2	3	4	5
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<b>E. Equity</b>					
How available are these services to all who need them without bias?					
1. To what extent are services available to all geographic areas in your community?	1	2	3	4	5
(Where are providers located for each type of service? Are there any areas of your community that certain providers cannot or do not serve? If yes, why are these areas unserved? What are the characteristics of the neighborhoods without service (e.g. distance from any town, socioeconomic status, age concentrations, population density, etc.)?					
2. To what degree are services available to all populations in your community without bias?	1	2	3	4	5
(What are the demographic characteristics of consumers? How do consumer characteristics (%) compare to the characteristics of your community's general older and disabled adult population in terms of age, gender, and ethnicity?)					
3. To what extent do providers treat subsidized consumers the same as private pay consumers, if applicable?	1	2	3	4	5
(Are there differences in services provided to subsidized vs. fee paying consumers? Which categories of services exhibit equity to both groups? Which categories of services appear to treat consumers/patients/customers differently according to payment source?)					
4. If there is a waiting list, how sufficient is the system in place for prioritizing consumers in terms of need?	1	2	3	4	5
(What rules, policies, procedures are in place for prioritizing consumers?)					
5. How sufficient are the providers' nondiscrimination policies?	1	2	3	4	5
(What are the discrimination policies of providers? Do they differ from state and federal law? Are staff and consumers informed of the policy? How?)					
<b>OVERALL EQUITY RATING</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

<b>F. Quality/Effectiveness</b>					
How successful are these services in addressing consumers' needs?					
1. To what extent do the programs have special quality assessment or improvement efforts underway?  (What process, QA or outcome evaluations have been performed by providers during the past 5 years? What were the results of these initiatives?)	1	2	3	4	5
2. To what extent does an advisory committee(s) that includes adults with hearing impairments help guide the operations of the programs?  (Do providers have an advisory committee? If so, who is on it? How often does it meet? What are the responsibilities of the committee? What % of committee members have hearing impairments?)	1	2	3	4	5
3. Do any funders regularly monitor the supportive services?	Yes		No		
4. Are there professional associations that govern the ethics and practices of: Interpreters? Physicians who specialize in hearing loss? Audiologists? Business that sell hearing aides?	Yes		No		
5. To what extent do the providers survey consumers and their families to determine satisfaction with services?  (Have consumers been surveyed in the past 5 years? If so, what process was used? What were the major findings?)	1	2	3	4	5
6. To what extent do the providers act on consumers' feedback?  (What policy and/or programmatic changes have occurred in the past 5 years as a direct result of consumer feedback?)	1	2	3	4	5
7. How sufficient is the complaint resolution process?  (What is the complaint resolution process for each provider? For each provider, how many complaints were documented last year? What was the nature of the complaints? What % were resolved?)	1	2	3	4	5
8. To what extent are complaints considered during planning, program development, or quality improvement efforts?  (What policy and/or programmatic changes have occurred in the past	1	2	3	4	5

5 years as a direct result of consumer complaints?)	
9. To what extent can the programs accommodate the needs of all consumers and/or families requesting services?  (Are consumers requesting services that are not available in your community?)	1 2 3 4 5
10.To what extent do programs regularly communicate unmet needs to county commissioners, planning, and other agencies?  (Are service providers represented in meetings of county commissioners, planning boards and other agencies? How?)	1 2 3 4 5
<b>OVERALL QUALITY/EFFECTIVENESS RATING</b>	<b>1 2 3 4 5</b>

<b>Recap of Overall Ratings for Services for the Deaf and Hard of Hearing</b>					
Existence	1	2	3	4	5
Adequacy	1	2	3	4	5
Accessibility	1	2	3	4	5
Efficiency and Duplication	1	2	3	4	5
Equity	1	2	3	4	5
Quality/ Effectiveness	1	2	3	4	5

**Services for the Deaf and Hard of Hearing's Major Strengths:**

**Identified Barriers and Areas for Improvement:**